DATEST ADALICATION FOR THE CONTROL TO CONTRO									Application or Docket Number			
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001									10 020, 954			54
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		THAN ENTITY
TOTAL CLAIMS			20		•			RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			ე_0 minus 20=		· Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			9 minus 3 =			Ø		X42=		OR	X84=	
M	ULTIPLE DEPE	NDENT CLAIM P	RESENT /					+140=	1-	OR		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) 6-1-05 (Column 2) (Column 3)								SMALL	. ENTITY	OR	OTHER	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	- 2	٥			X\$ 9=		OR	X\$18=	
₹	Independent	* 3	Minus	DENIDE NO	3		•	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						I	+140=		OR	+280=	
۵	-19-0	5					L	TOTAL DDIT, FEE			TOTAL ADDIT, FEE	
	1950	(Column 1)		(Colum		(Column 3)				•	ADDII, PEE1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	- 20	Minus	- 2	0_	- / <u>/</u> /		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	NTATION OF ML	Minus	PENDENT	CLAIM	1- Ø-		X42≖		OR	X84=	
								+140=		OR	+280=	
٠.							Δſ	TOTAL OIT. FEE		OR ,	TOTAL DOT, FEE	
		(Column 1)		(Colum	n 2)	(Column 3)				, ,	www.rce L	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID R	st er Jsly	PRESENT EXTRA	T	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	•	Minus	••		•	T	X\$ 9=		<u>,</u> t	X\$18=	755
	Independent	•	Minus	***		-	-	X42=		OR		
1	FIRST PRESE	NTATION OF MU	LTIPLE DE	PENDENT (CLAIM		-	~76=		OR	X84=	
• H	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FOR											
	THE THICKNESS NUT	mer Previously Pai mer Previously Paid ber Previously Paid	d For IN THI	S SPACE IN	oes than	2 color *2 *		DIT. FEE			TOTAL DDIT. FEE	
_	070.55								,			

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